

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			8-10-01
FORMALITY REVIEW	FP	1027	09/08/01
RESPONSE FORMALITY REVIEW	A.T.	1031	01/04/02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 (Through numeral)..... Canceled A Appeal
 Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	7-24-01
2	✓	✓	12-16-01
3	✓	✓	8-18-01
4	✓	✓	1-23-02
5	✓	✓	2-10-02
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
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47	✓	✓	
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49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	7-24-01
52	✓	✓	12-16-01
53	✓	✓	8-18-01
54	✓	✓	1-23-02
55	✓	✓	2-10-02
56	✓	✓	
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Claim	Final	Original	Date
101	✓	✓	
102	✓	✓	
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106	✓	✓	
107	✓	✓	
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142	✓	✓	
143	✓	✓	
144	✓	✓	
145	✓	✓	
146	✓	✓	
147	✓	✓	
148	✓	✓	
149	✓	✓	
150	✓	✓	

If more than 150 claims or 10 actions
 staple additional sheet here

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